23 MAR 2006

- 1														
	PATENT APPLICATION FEE DETERMINATION RECORD								• •	Application or Docket Number				
		Effective December 8, 2004												
I		CLAIMS AS FILED - PART I National Stage Processing Particular Small En								Minoton Shown de				
OEMINS AS FILI				ED - PART	1 1/3	SUPER SEEDS PRO		SMALL E	ENTITY		Mattered Str	in Proc		
ŀ				Column 1)		Persispal Specialist 71 (703) 605-6421				. (OR THER THERE			
U.S. NATIONAL STAGE FEES			s		T		7	RATE	7		(703) 388-0	821	11 (* 4*	
В	ASIC FEE		SMAL	L ENT. = \$ 150	IAI	RGE ENT. = \$ 300	┨		FE		RATE	_ _	FEE	
E	XAMINATION	1 FEE	Satisfies	Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		All other situations =		BASIC FEE	15	7	PASIC FEE			
SEARCH FEE			U.S. is 1S	U.S. is ISA = \$50/\$100 ALL other countries =		\$ 100 / \$ 200 All other situations =		EXAM. FEE	10		EXAM. FEE			
FEE FOR EXTRA SPEC. PGS.			\$ 2	\$ 200 / \$ 400		\$ 250 / \$ 500		SEARCH FE	20	0	SEARCH FE	Ε .		
 -				minus 100 =		/ 50 =		X \$ 125 :	-		X \$ 250 :	-		
-	TOTAL CHARGEABLE CLAIMS					-/		X \$ 25 =	20	5 0	R · X \$ 50 =	1	<u> </u>	
-	INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRE			. minus 3 =	•			X \$ 100 =		OI	R X \$ 200 =	1		
								+ \$ 180 =		OF	+ \$ 360 =	1		
•	r are dillerei	nce in column 1 i	is less than:	zero, enter "0"	'in c	olumn 2		TOTAL	47	o _F	TOTAL	+-		
		CLAIMS AS	AMEND	FD - PΔRT	11				,			-		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2						(Column 3)		SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A	l	CLAIMS REMAINING		HIGHE:		T	1		ADDI-	7				
	Total	AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	TIONAL FEE	.	RATE	TIO		
			Minus	**		=		X \$ 25 =		OR	X \$ 50 =		\dashv	
	Independent		Minus	***		=		X \$ 100 =		OR	X \$ 200 =		\dashv	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				AIM			+ \$ 180 =	-	OR	+ \$ 360 =		\dashv	
							_	TOTAL ADDIT. FEE		ОR	TOTAL ADDIT. FEE	-	\dashv	
		(Column 1)								4	rce		ᅱ	
		CLAIMS	T	(Column HIGHEST		(Column 3)	_							
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION FEE	AL	
	Fotal	•	Minus	44	-			X \$ 25 =		OR	X \$ 50 =		\dashv	
	ndependent	*	Minus	***	-			X \$ 100 =		OR	X \$ 200 =	 -	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				IM			+ \$ 180 =		OR	+\$ 360 =	·	\dashv	
	TOTAL ADDIT.									L	TOTAL ADDIT.		4	
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					•••••	6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		• ••						
H I	the entry in colu	umn 1 is less than the	entry in column	2, write "0" in col	umn 3.									
· W	he "Highest Nu	mber Previously Paid	For IN THIS S	PACE is less than	1 20', €	enter "20".							İ	
T	e Highest Num	nber Previously Paid (For (Total or In	dependent) is the	i J, er highes	iver 3°. I number found in t h	10 as	propriate boy 4	Cohene 1					
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